

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000105400

FILED
Sep 13, 2009
Secretary of State**Entity Name:** LEVITT & SON'S CONTRACTOR'S INC.**Current Principal Place of Business:**28821 BENNINGTON DRIVE
WESLEY CHAPEL, FL 33544**New Principal Place of Business:****Current Mailing Address:**28821 BENNINGTON DRIVE
WESLEY CHAPEL, FL 33544 US**New Mailing Address:****FEI Number:** 22-3838409**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LEVITT, BEVERLY W
28821 BENNINGTON DRIVE
WESLEY CHAPEL, FL 33544 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:_____
Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** VS/S (X) Delete
Name: LEVITT, JOSHUA S
Address: 28821 BENNINGTON DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544 US**Title:** VS () Delete
Name: LEVITT, TRAVIS A
Address: 11707 MEADOWLANE DRIVE
City-St-Zip: DADE CITY, FL 33525 US**Title:** P/T () Delete
Name: LEVITT, BEVERLY W
Address: 28821 BENNINGTON DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VS/S (X) Change () Addition
Name: LEVITT, TRAVIS A
Address: 11707 MEADOWLANE DRIVE
City-St-Zip: DADE CITY, FL 33525 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEVERLY W. LEVITT

P/T

09/13/2009

Electronic Signature of Signing Officer or Director_____
Date